

**VIRGINIA DEPARTMENT OF WILDLIFE RESOURCES**  
**APPLICATION FOR VIRGINIA SCIENTIFIC COLLECTION/RESEARCH/SURVEY**  
**PERMIT (28 – SCSV)**

(Under Authority of §29.1-412, §29.1-417, §29.1-418, §29.1-521, §29.1-568 of the Code of Virginia  
and 4 VAC 15-30-1 and 4 VAC 15-290-20 of the Virginia Administrative Code)

**Non-Refundable Application Fee: \$40 (Two Year Permit)**

Permit Period January 1<sup>st</sup> through December 31<sup>st</sup> (or Part Thereof first year)

**Completed materials must be submitted electronically 3-4 weeks prior to the collection period to:  
[collectionpermits@DWR.virginia.gov](mailto:collectionpermits@DWR.virginia.gov).**

If renewal, give current permit number: \_\_\_\_\_

Full Name of Principal Applicant: \_\_\_\_\_

Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

Address2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_ Last 4 of Driver's Lic#: \_\_\_\_\_

Email: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Cell Phone or Alternate Contact Phone: \_\_\_\_\_

If Contracted/Cooperating, by/with whom: \_\_\_\_\_

**A FORMAL PROPOSAL/STUDY PLAN MUST BE SUBMITTED WITH THIS APPLICATION.**

**Purpose of Collection (Check all that apply):**

☐ Agency Species Management

☐ Biomonitoring

☐ Contract Environmental Impact

☐ Contract Species Survey

☐ Instructional

☐ Research

☐ Volunteer Species Survey

☐ Other (Specify): \_\_\_\_\_

**Taxa Group:** YOU MUST CHECK ALL TAXA GROUPS WHICH APPLY. YOU MUST SPECIFY SPECIES AND NUMBERS TO BE COLLECTED FOR ANY ACTIVITY OTHER THAN CAPTURE AND IMMEDIATE RELEASE SUCH AS DNA SAMPLES, TAGGING, VOUCHER SPECIMENS OR ANIMALS RETAINED FOR CAPTIVE STUDIES.

☐ Amphibians: \_\_\_\_\_

☐ Aquatic Crustaceans (excluding crayfish): \_\_\_\_\_

☐ Aquatic Insects: \_\_\_\_\_

☐ Aquatic Mollusks: \_\_\_\_\_

☐ Birds: \_\_\_\_\_

☐ Crayfish: \_\_\_\_\_

USFWS/DWR Big Sandy Crayfish Approved Surveyor Yes: ☐ No: ☐

(ID to family only ☐ **or** ID to genus/species ☐ – must show experience and ability to ID)

☐ Fish: \_\_\_\_\_

☐ Freshwater Mussels: \_\_\_\_\_

USFWS/DWR Approved Surveyor Yes: ☐ No: ☐

☐ Macroinvertebrate Water Quality Sampling (NO ID for genus/species):  
\_\_\_\_\_

☐ Mammals:

☐ Furbearer: \_\_\_\_\_

☐ Small Mammals: \_\_\_\_\_

☐ Game: \_\_\_\_\_

☐ Marine: \_\_\_\_\_

☐ Other Aquatic Invertebrates: \_\_\_\_\_

☐ Reptiles: \_\_\_\_\_

☐ Terrestrial Invertebrates (not including insects):  
\_\_\_\_\_

**Collection Method(s) (Check all that apply):**

**Aquatic:**

☐ Collection by Hand

☐ Dip Net

☐ Electrofishing

☐ (Gill Nets/Trawl Nets)

☐ Aquatic Kick Samples

☐ Nets-Trap (Fyke/Hoop/D-Frame)

☐ Hook and Line

☐ HOOKA (Third Lung)

☐ Cast Nets

☐ Scuba (proof of certification must be provided)

☐ Seine Nets

☐ Snorkel

☐ View Scope

☐ Traps (Minnow/Pot/Bell)

☐ Substrate Grab Sampler (Vacuums/Dredge)

☐ Other (Specify): \_\_\_\_\_

**Terrestrial:**

☐ Audio (Anurans/Birds)

☐ Launched Nets (i.e. rocket, cannon, whoosh)

☐ Collection by Hand

☐ Foot-Hold Traps (Snare/Jawed/Tangle)

☐ Hand Nets (Butterfly/Reptile)

☐ Live-Traps (Box/Pitfall/Funnel/Bell/Pot/etc.)

☐ Lures (Baits/Light/Cover Boards)

☐ Terrestrial Mist Nets (Bats/Birds)

☐ Visual Encounter (turning over rocks/logs)

☐ Nocturnal (i.e. shining w/high-power spot light)

☐ Kill Traps (Pitfall/Snap Traps)

☐ Other (Specify): \_\_\_\_\_

Disposition: (released or preserved or retained in lab; if preserved or retained, indicate museum or university or other location specimens will be housed): \_\_\_\_\_

**County Name(s):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Waterbody(s):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Location Description:** \_\_\_\_\_

\_\_\_\_\_

**Sub-Permittees/Field Collectors:** (If you have more than five subpermittees, please provide a separate sheet)  
(A resume MUST accompany this application for ALL persons listed whether Principal Permittee/Applicant or Sub-Permittees/Field Collectors, first time students are exempt).

Name: \_\_\_\_\_ Affiliation: \_\_\_\_\_

Name: \_\_\_\_\_ Affiliation: \_\_\_\_\_

Name: \_\_\_\_\_ Affiliation: \_\_\_\_\_

Name: \_\_\_\_\_ Affiliation: \_\_\_\_\_

Name: \_\_\_\_\_ Affiliation: \_\_\_\_\_

"I CERTIFY UNDER PENALTY OF LAW THAT THE INFORMATION SUBMITTED IN THIS APPLICATION IS, TO THE BEST OF MY KNOWLEDGE, TRUE, ACCURATE, AND COMPLETE. I ALSO AGREE TO THE PERMIT CONDITIONS PROVIDED WITH THIS APPLICATION AND TO ANY SPECIAL CONDITIONS PLACED ON MY PERMIT. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT."

Applicant Name \_\_\_\_\_

Date \_\_\_\_\_

TYPED SIGNATURE IS AUTHORIZED AND BINDING PER CODE OF VIRGINIA §59.1, CHAPTER 42.1, ET SEQ.

Make checks payable to "Treasurer of Virginia" and remit to Virginia Department of Wildlife Resources, Permits Section P. O. Box 3337, Henrico, VA 23228

**Receipt of payment does not imply approval of permit request.**